ANNUAL REPORT

UPON THE

PUBLIC HEALTH AND
SANITARY ADMINISTRATION

OF THE

Rural District of Abergavenny

FOR THE

Year 1952

BY

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MEDICAL OFFICER OF HEALTH

AND MEDICAL OFFICER OF HEALTH No. 10 AREA



Annual Report

1952

I have the honour to present the Annual Report of the Medical Officer of Health, Abergavenny Rural District.

The health of the population of the Rural District has been, on the whole, well maintained. The crude death rate in 1952 has shown a satisfactory decrease as compared with the previous year, and is lower than that experienced in the County of Monmouthshire and in England and Wales generally. Coupled with the decline in the death rate, there has been an increase in the average age at death. In other words, the people are healthier and are living longer.

It is possible that the rural conditions of the area together with improved housing and a maintenance of a high percentage of full employment are partially responsible for this decrease in mortality.

Though there have been no deaths of mothers through child-birth, a continued fall in the birth-rate, an increased infant mortality rate and a higher still-birth rate stress the importance of maternity and child welfare in the life cycle of the district, country and nation. Thus, it is incumbent upon all, whether medical or lay, to ensure that this trend is reversed.

Whilst the total number of deaths attributed to Cancer have shown a slight increase, Cancer of the lung, a subject of current controversy, has been responsible for less than one-fifth of this whole. The majority of deaths in this district are due to circulatory diseases as are the majority throughout the country; Coronary Thrombosis taking the highest toll.

The gradual decline of Infectious Diseases throughout this century has been maintained, thus, whilst the problem of care for the young, is diminishing, for the aged, both medically and socially, is increasing. None wish to die young and fortune is fickle, therefore it is in our own interest to see that adequate provision is made for the elderly.

It is often not easy to establish the precise relationship between housing conditions and disease, but it is generally accepted that bad housing conditions are inimical to the health of the people. In 1952, 71 new dwellings became available, the highest in any one year since the war; another rung but on a very tall ladder as there remains 435 applicants on the housing waiting list. It is appreciated that the Housing Authority is undertaking all possible steps to overcome these difficulties and that the programme is gathering momentum. Especially gratifying is the fact that of the above total of new houses, a number have been provided for the elderly.

One notes that the sanitary conditions within the Rural District are slowly improving. Although too many cottages still have their bucket lavatories and well-water supplies, it is hoped that further impetus will be given to the work of providing proper sewage disposal plants and an adequate supply of pure, wholesome water to the general population in the near future.

Maternity and Child Welfare.

The Infant Welfare Clinic is held on the Tuesday of each week, and Ante-natal clinic on alternate Tuesdays. Mothers and children under 5 years of age from the Borough of Abergavenny and from the Rural District may attend at these Clinics. There are two Health Visitors and a Doctor in attendance.

I wish to stress here the importance of early and regular attendance of expectant mothers at the Ante-natal Clinic, so that any departure from the normal may be detected as soon as possible, and the necessary steps taken in respect of adequate care of the mothers. Unfortunately, too often many expectant mothers delay attending until late in pregnancy.

It is now the practice in the ante-natal clinic to make a routine blood examination of all patients for the purpose of detecting venereal diseases and for determining the pregnant mother's blood group. The educational side of ante-natal work is also of great importance and includes advice about general health, rest, diet, sleep and comfort.

In 1952 a monthly average of 197 babies attended the Infant Welfare Clinic. Welfare Food is obtainable at the Centre with the exception of National Dried Milk, Cod-liver Oil and Orange Juice which are available at the Food Office.

The principle causes of Infant deaths are Prematurity. Congenital Debility, Congenital Abnormalities and Pneumonia. Adverse physical conditions and lack of care, which the older child can withstand often prove fatal during earlier months of life.

Material resources (housing standards, sanitation, feeding etc.) parental care and medical and nursing services, each play a part in the infant's chance of survival. The Infant Welfare Clinic has an important role in the care of the infant and young child. Babies are weighed weekly and are seen regularly by the Doctor. Health Education is stressed and informal talks are given to mothers on the principles of hygiene and healthy living. The prevailing Infant Mortality Rate calls for renewed efforts on the part of all concerned with the care of infants.

Towards the end of 1951, the routine skin testing of children under 5 years, with tuberculin was introduced at the Infant Welfare Clinic. The Mantaux and Jelly Tests are employed. Any positive reactions are referred to the Chest Physician, and all efforts are then concentrated in determining the source of infection. This aspect of Infant Welfare Work forms a part of the Anti-Tuberculosis Scheme in operation throughout the County of Monmouthshire.

Vaccination against Small Pox and Immunisation against Diphtheria are also undertaken at this Clinic. The main object of immunisation schemes is to secure that each generation of infants receives protection at an early age. It is now recommended that an infant should be immunised against Diphtheria at or about the age of 8 months. The fall in the incidence of Diphtheria in recent years is beyond reasonable doubt a remarkable preventive triumph mainly attributable to immunisation. Vaccination against Small Pox is advised when the child has attained the age of 3 months. Since compulsory vaccination has been abolished, the Abergavenny Rural District like the rest of the country, has followed the trend of a decrease in the numbers vaccinated; from the public health point of view this is regrettable.

Small Pox continues to occur sporadically in various parts of the country and we are never free from the possibility of an outbreak of this disease. Healthy living conditions, good sanitation and general public health services are no substitute for vaccination in connection with the prevention and control of Small Pox.

Since the National Health Service Act, 1946, came into operation, Vaccination against Small Pox and Immunisation against Diphtheria have been carried out free of charge both at the surgeries of General Practitioners and at the Maternity and Child Welfare Centres. Great encouragement is given to mothers to have their children vaccinated and immunised.

Again, vaccination figures have improved in 1952. Those immunised against Diphtheria are less which emphasises the need for further propaganda.

Vaccination against Small Pox.

Age Groups	Num	bers vaco in 1950	inated	Numbers vaccina in 1951	ated Nu	mbers vaccinated in 1952	d
Under 1 year	•••	14	•••	10	•••	21	
1-4 years		6		13	•••	2	
5-14 years		1		3	•••	5	
15 plus	•••	9		14		166	
•						_	
Totals		30	•••	40	•••	194	

Immunisation against Diphtheria.

Age Groups	Nun	ibers imm in 1950	unised	Numbers immunised in 1951	l Nu	imbers immunised in 1952
Under 5 years 5—14 years	•••	56 2	•••	44 59		42 7
Totals	•••	— 58		103		- 49

Domiciliary Midwifery Service.

Under the re-allocation of the District Midwifery Service, four Midwives are resident in the District. The monthly average of nursing visits was 88.

District Nursing Service.

There is one District Nurse resident in the Rural District. The monthly average of nursing visits was 278.

Health Visiting.

Three Health Visitors are employed for routine Domiciliary Visits, Tuberculosis visiting, School Inspections (cleanliness of body and clothes) and for attending the Maternity and Child Welfare Clinic.

Domestic Help Service.

The County Council provides a Domestic Help Service for those cases where there is an illness and where there is no able-bodied relative to give the necessary assistance in the household.

The service has been useful in providing assistance to aged persons and cases of Chronic Sick, who otherwise would have had to be admitted to Hospital, thereby helping to relieve the pressure upon hospital accommodation.

The Service is under the direction of the Area Committee Clerk (Mr. D. A. Lewis). Applicants for the Service are assessed to repay the cost of the service in relation to their income; persons considered to be in financial difficulties receive the Service free of charge.

The hours allocated to each case are recommended after personal investigation by the District Nurse, Midwife or Health Visitor, and are submitted to me for approval. Cases where recommendation exceeds 30 hours per week have to be submitted by the Area Committee Clerk to the County Health Committee for investigation, except maternity cases.

There are approximately 44 Domestic Helps in the area of which approximately 6 are working in the Rural District. All are engaged on a Temporary part-time basis. The number of cases attended in the area was 100; the average monthly number of hours worked was 2910.

Ambulance Service.

Abergavenny Rural District is served by two St. John Ambulances with four drivers, and they provide the Ambulance Services for the Borough and adjacent area, under the cental control of the County Ambulance Officer at Caerleon. This system seems

to work reasonably well. Central Control aims at making the most economic use of ambulances, and mutual assistance between local Health Authorities avoids, as far as possible, ambulances running empty. However, it is felt that when the sick are transported by ambulance, there should always be an attendant with some nursing training travelling along with the Ambulance Driver.

Health Education.

The close of the 19th century saw the Public Health environmental services established on a reasonably satisfactory basis. During the last 50 years, these have been improved and the personal health services developed. At first, the importance of Health Education was not fully appreciated but it is now realised that disease cannot be prevented or health promoted by social action alone, there must be full co-operation from an enlightened public. Today, it is second nature for the appropriately trained staff of a Health Department, whether they be Health Visitors, Home Nurses, Sanitary Inspectors or Doctors to spread the gospel of good hygiene and healthy living.

In order to further disseminate knowledge of Health Education, a Health Conference was held at the County Hall, Newport, in February, 1952, this being the 4th Annual Conference in the County of Monmouthshire. The speakers included:—

- A. J. Dalzell Ward, M.R.C.S., L.R.C.P., D.P.H., Deputy Medical Director, Central Council for Health Education.
- John Burton, M.R.C.S., L.R.C.P., D.P.H., Medical Director, Central Council for Health Education.
- Mrs. I. M. Stirling, M.A., Educational Psychologist, The National Association for Mental Health.

Lectures were both varied and interesting, and ranged from Infancy to Adolescence; Adolescence to Maturity; Maturity to Old Age; and Mental Health in Relation to the Family.

Mental Health Service.

A County Psychiatrist was appointed in 1948 for the purpose of a Mental Health Service. This service, in the No. 10 Area, now

operates from Leven House. The service is co-ordinated with the Regional Hospital Board and Hospital Management Committees.

No adult Guidance Clinics are held in Abergavenny, but individual cases, patients suffering from early nervous strain, and who are finding difficulty in adjusting themselves either in their homes or at their work, are seen by Dr. J. Newcombe, the County Psychiatrist. Cases considered too far advanced are referred to the Regional Hospital Board Psychiatrist.

Medical Appliances.

The location of the Medical Appliances Department for the Rural District is St. John Ambulance Hall, Abergavenny.

Welfare Services.

Total

4

The Welfare Officer of No. 10 Area caters for the needs of Abergavenny Rural District as regards Welfare Services, which come within the provisions of the National Assistance Act (1948-51). Cases are interviewed at their homes or at the Welfare Office in Leven House.

VITAL STATISTICS.									
Area		•••				62685	Acres.		
Population	(Estin	nate	d)	•••		8344			
Number of Inhabited Houses (according to Rate									
Book	on 31	L/12/	52)	•••	•••	2240			
Rateable V	alue					£34564			
1d. Rate						£131			
1952	Total	M.	F.	1952	Rural D.	County			
Live Births							& Wales		
		51	58)	Live-birth Rate per	-				
Illegitimate	5			1000 estimated					
	_	_	[resident population	13.66	17.17	15 [.] 3		
Total	114	55	59)						
Still Births	•								
Legitimate	4	3	1)	Still birth Rate					
Illegitimate	0	3	0	per 1000 total					
			-	Births	33.9		22.6		

1)

Deaths.

All Causes 94 44 50 Death rate per 1000 estimated resident population ... 11'26 11'52 11'3

Deaths from Cancer
All ages 17 8 9
Lung 3 2 1

Deaths due to Pregnancy, Childbirth, Abortion 0
Maternity Mortality Rate (Rate per 1000 births) 0
0.71

Infant Mortality.

Infant Deaths from Measles ... Nil
Whooping Cough ... Nil
Diarrhœa ... Nil
All causes ... 5 (2 m. 3 f.)
Neonatal deaths (1 m. 2 f.) = 3

Deaths of Children under 1 year of age in Age Groups.

Age Group.

Under 1 week

1 - 3 weeks

4 weeks - 1 year

Total

Number of Deaths.

2

2

1 - 3 weeks

5

Infant Mortality Rate (Rate per 1000 Live Births)

(Legitimate)

(Illegitimate)

,,

,,

Nil

INFECTIOUS DISEASES.

Notifiable Infectious Diseases (other than Tuberculosis)

classified according to age groups.

Disease		A ge 0-4	Age 5-9	Age 10-14	Age 15-24	Age 25 & Over	Total	Adm'd to Hospital
Diphtheria	•••	• • •		•••	•••			• • •
Scarlet Fever			2	1			3	1
C.S. Meningitis								
Measles		1		1			2	
Whooping Cough	ı .	5	2	2			9	
Enteric Fever								
Poliomyelitis					• • •			
Dysentery						1	1	
Acute Primary Pr	neumonia				• • •	2	2	
Erysipelas	•••							• • •
Encephalitis				• • •				
Abortus Fever	•••	• • •			•••	• • •		• • •
		_	_		_			_
To	otals	6	4	4		3	17	1

TUBERCULOSIS.

Notified:	Pulmonary	- M 6 F 10	Non-Pulmonary	- M 0 F 1
Deaths:	do.	MOF 0	do.	M0F0

Infectious Diseases.

During 1952, the Abergavenny Rural District was remarkably free from any outbreaks of Infectious Diseases.

Diphtheria.

One of the most satisfying facts in the control of infectious diseases has been the nation-wide decline in the incidence of and mortality from Diphtheria. There were no notifications of Diphtheria within the Rural District in 1952. Nevertheless, Diphtheria "still kills" and the percentage of children immunised is unsatisfactory. Parents are continually urged to see that their children are adequately protected and they should avail themselves of the facilities provided.

Scarlet Fever.

This remains a mild disease. Only 3 cases were notified in 1952. Although the notification figures indicate a diminished

incidence in Scarlet Fever, it is possible that notification was incomplete, but it is beyond reasonable doubt that fatality from this disease has diminished in recent years.

Measles and Whooping Cough.

The incidence of Measles has ebbed and flowed at intervals of 2 years, 1952 being the inter-epidemic year with only 2 notifications. It is noteworthy that Whooping Cough, still a dreaded disease of infancy did not rear its head to any marked degree.

Advances in therapeutic agents with improved nursing care in recent years have helped to lower the fatality from these diseases. Less overcrowding in the homes through reduction in family size, and in some cases improved housing may also have contributed to the decline in mortality.

Infantile Paralysis.

Was conspicuous by its absence in the Rural District.

Tuberculosis.

The Mass Radiography Unit visited the area in May, 1952, and the response of the general population was most satisfactory. Following this visit, one would have expected an increase in the notifications from Pulmonary Tuberculosis, but this was not the case. Incidence of Tuberculosis, as measured by notifications figures, remained constant; fatality rate was nil. However, this gives no real grounds for complacency and calls for renewed efforts in both prevention and early treatment of this disease.

In conclusion, although tremendous improvements have been brought about in the standards of environmental hygiene and personal health services in the present century, there may still be outbreaks of infectious diseases due to failure of water supplies and sewerage or to failure of the hygiene of milk and other food control. Therefore, it is still the task of the Medical Officer of Health and her fellow Local Government Officials to maintain constant vigilance.

I have the honour to be,

Your obedient Servant,
S. M. R. HARVEY,
Medical Officer of Health.

I. Housing.

Number of Houses owned by Local Authority		
December, 1952	28	32
Number of Houses in course of erection	4	18
Number of Houses completed during the year	7	1
Number of Houses for which sanction has been give but had not been commenced	en, N	il
Number of Houses erected by Private Enterprise	•••	9
Number of Houses inspected for defects in 1952	2	28
Number of Houses repaired as a result of action by t	the	
Local Authority		8
Number of Houses in respect of which Statuto		
Notices were served to carry out repairs	1	.1

II. Water Supply.

Owing to the variations in altitude and the number of scattered, sparsely populated villages and hamlets, the water supply of the area is one of the Authority's biggest problems, particularly as the number of houses increase. The sources of water supply are numerous; mainly springs. In the larger villages, e.g., Mardy, Llanvihangel Crucorney, Llanover and Pandy, the supply is sufficient and the quality up to standard; but there are a number of smaller villages and outlying dwelling houses where the supply is inadequate, or where analysis reports are not always satisfactory.

The main piped supplies owned by the Local Authority are:-

1. Govilon. Blakes Hydraulic Ram has been taken out of commission, as a connection was taken off the Abertillery Water Board's 16" main through a \(\frac{3}{4}\)" Break Pressure Valve (set at 80 lbs.) to supply the 56 houses on the zone between the 350 ft. and 600 ft. contour O.D. The properties on the lower zone numbering 84, are supplied from the Ffynon Batric Spring by gravitation.

A 3" connection was made in the Newport Corporation's new 28" main near the Carpenter's Shop, Govilon.

The inhabitants of this part of the District obtained their water supply from the Forge Spout. To afford a constant supply, a 1" pipe was laid from the Railway Bridge to the Forge Cottages, for a distance of 366 yards. A 1" rising main was taken from the storage tank near the Chapel School (450 ft. O.D) to Maesyfelyn, which is on the 600 ft. contour. This supplies 7 houses, and 1 farm. The amount of pipe laid was 600 ft. of 1" galvanised main, and 50 ft. of ½". At Maesyfelyn, this supply ends as a stand-pipe. A 1" main was taken from the 1½" Rising Main near the Ram House, to Upper Mill Farm. A T-piece was inserted in the 1" main, and 250 yards of ¾" main, and 34 yards of ½" main laid to the 4 cottages at the Aquaduct.

A $\frac{3}{4}$ " connection was taken off the 1" main at Maesyberllan and extended to Boat Farm, Govilon. This necessitated the laying of 450 ft. of $\frac{3}{4}$ " main.

2. Pwlldu. A 2,000 gals. storage tank at the source of the spring in adit. supplies 35 premises by means of 6 stand-pipes. This is the only supply in the district showing any plumbo-solvent action; and as a precaution galvanised iron pipes are used. The 1½" main was extended from the Long Row to the Breconshire Boundary. This affords a supply to 4 cottages. The amount of pipe laid was 1,389 ft. of 1½" galvanised main, 271 ft. of ¾", and 56 ft. of ½". A ¾" connection was taken from the 1½" main, to afford a water supply to the houses at Short Row. This necessitated the laying of 105 ft. of ¾" main, and 84 ft. of ½" main.

The stand-pipes have now been dispensed with.

- 3. **Garndyrys**. Spring with stand-pipe supplies 10 premises; with an extension for 60 yards to a stand-pipe fixed near Garndyrys Cottage.
- 4. Allws. The Abertillery Water main was tapped and a \(\frac{3}{4}\)"

 Break Pressure Valve inserted to afford a water supply to the inhabitants in this area.

- 5. Llanfoist. The supply for this area is now being obtained from the Llanover Water Scheme; 4", Class "C" Cast Iron pipes conveying the supply to some 96 premises and the Factory; with two stand-pipes for the few remaining premises not connected to the main. The average consumption for the private dwellings is approximately 7,000 gallons per day. A 4" connection taken from your main near Beechgrove supplies the Council's Housing Site. The necessary fire hydrants are installed.
- 6. Llanellen. A spring connected to a 1½" pipe supplies some 16 premises. The quality is satisfactory, but quantity not always adequate. During the year the work was commenced of connecting premises to the Llanover Water main. A 3" connection has been taken to the Council's Housing Site; further connections are being made including the connection of the School premises.
- 7. Mardy. Tynywern spring connected to 5, 4 and 3 inch pipes supplies 86 premises, all of which are connected to the main; with \(\frac{3}{4}\)" branch pipes supplying Mardy Park and the Mill.

A $\frac{3}{4}$ " connection was made in the 3" main to afford a supply to Parsonage Farm, Llantilio Pertholey.

A $\frac{1}{2}$ " connection was taken off the 3" main to Nos. 1 and 2, Blorenge View, Mardy, these premises having previously received their supply from a private source. The Council's main was extended up the Midway Lane, to supply the 22 houses erected by the Council.

A 1½" connection was made in the 4" main to afford a water supply to Mardy Park.

During the year, the main was extended to afford a piped supply to Llantilio Pertholey School. This necessitated the laying of 546 yards of 3" Asbestos Main, and 16 yards of 3" Cast Iron Main.

8. Llanvihangel Crucorney. The overflow from the Tynywern Spring is utilised to raise 12,000 gallons per day by hydrostats

through 3" pipes to a 20,000 gallon concrete water tower. 70 premises are all connected to the main.

A ½" connection was taken off the rising main to afford a water supply to Little Llwyn Gwyn, Llanvihangel Crucorney.

A $\frac{1}{2}$ " connection was taken off the 3" main coming from the 20,000 gallon storage tank to afford a water supply to Bridge Farm.

A ½" connection was taken off the 3" rising main from the Hydrostats to the New Bungalow near Llanvihangel Station.

A connection was taken off the rising main to afford a supply to Llanvihangel Station.

Plans have been prepared to install electric pumps to afford a supply to Brynygwenin area. This scheme is intended also to supply Pantygelli and Pandy, thereby doing away with the Hydrostats.

A 1" connection was taken from the existing 3" main, and 300 ft. of 1" main was laid to Penybont Cottages.

- 9. Llanvetherine. A spring with 1" pipe to tank and stand-pipe supplies 5 buildings near the main road. Another spring supplies 17 premises in Caggle Street area by means of two stand-pipes; some of the dwellings being at too high a level for gravitation.
- 10. Llangattock Lingoed. A spring with small tank and \(^3\)" pipe to a stand-pipe, supplies 12 premises; the level of the source being too low for connection into the houses.
- 11. Bettws Newydd. A spring with storage tank is connected to 4 premises in the village. An asbestos main has been laid from Clytha to Bettws Newydd, this being an extension of the Llanover Water Scheme. Premises situated on the line of this main have been connected, and an extension has been made to Redgates, Trostrey. During the year a 1" branch was laid from the main to supply The Rectory, New Bungalow and Bettws Lodge.

- 12. Penlanlas. A spring on the side of the Deri is utilised to supply Penlanlas Cottages and the Farm.
- 1. Llanover. Llanover Village is supplied by a 2" pipe from Coedyfelin spring to a 25,000 gallon storage tank, which serves 34 premises. New Inn spring supplies another 23 premises in or near the village; Cwm Uchaf spring supplies another 9 premises through a 1" pipe. The work in connection with the Llanover Water Scheme was completed early in the year, as a result of this work, the following areas now have a piped water supply:—Llanellen, Llanover, Llangattock-nigh-Usk, Llanvair Kilgeddin, Bryngwyn, Llanddewi Rhydderch, Llanarth, Clytha and Bettws Newydd.

The 3" main has been extended from the Red Lion, Bryngwyn to the Raglan Boundary to supply premises in the area.

During the year, the Hamlet of Hardwick was included in the Llanover scheme; an extension being made from Llanellen. 1677 yards of 3" Class "D" Asbestos Main; 187 yards of Class "C", Cast Iron, and 817 yards of \(\frac{3}{4} \)" galvanised main were laid. The work of connecting premises to the main was put in hand and 119 connections were made during the year.

- 2. Llanarth. A spring near Upper House supplies 19 premises through a 2½" pipe; the village of Llanarth is supplied by springs at Coed-y-gelli. Great Oak now receives the water supply from the Llanover Main, as does the Council's two Agricultural Houses.
- 3. Grosmont. Supply is carried by $1\frac{1}{2}$ " pipe from spring to a tank at upper end of the village; and from there by gravitation to 20 premises through 2, $1\frac{1}{2}$ and $\frac{3}{4}$ inch pipes.

Plans have been prepared to afford a water supply to the inhabitants in this area, from springs situated at Yew Tree Farm, Grosmont. Yields of these springs are being kept under observation.

Apart from the piped supplies there are a number of wells in the district supplying outlying dwellings.

4. Wells. All the Wells in the area are covered in, the supply being obtained through 2½" Small York Hand Pumps.

Water Samples. During the year 19 samples of water were obtained and submitted to the County Pathologist for analysis.

Pen-y-val Hospital. These premises obtain their water supply from the Tynywern Supply; a 4" connection having been taken from the main at the top of the Hereford Road.

III. Sewerage.

The only Sewerage works are those for the villages of Llanvihangel Crucorney and Mardy, with Disposal works near Abergavenny Junction Station.

Llanfoist Factory has its own Sewerage Plant.

A Sewerage Scheme was installed to take the sewage from the Llanfoist Council Houses to the Borough Sewerage Works. Plans, Specifications and Quantities are prepared for Llanfoist No. 1 Sewerage Scheme, this scheme when completed will serve the village. During the year this Sewerage Scheme was commenced.

A Sewerage Scheme is also being prepared for Govilon; this scheme will pick up all the premises in the area to Ordnance Datum 400. The Sewage will be conveyed to the Gilwern Sewerage Works.

Preparation of plans, etc., are in progress for a Sewerage Scheme in the Parish of Grosmont.

During the year, work commenced on the installation of a Sewerage Scheme for Llanvair Kilgeddin. This will take the sewage from the Council Houses, School and surrounding properties. The treatment works have been placed on the bank of the River Usk.

IV. Milk Supply.

During the year 3 samples of milk were collected and submitted to the County Pathologist for analysis.

V. Refuse Collection.

This collection has now been extended to cover almost the whole of the Rural Area.

VI. Meat Inspection.

No inspection of carcases takes place in the Rural District, as all slaughtering of animals is carried out at the Abergavenny Abattoir.

VII. Rodent Control.

The Assistant Rodent Operative continued to carry out inspections throughout the District under the Infestation Order and Destruction of Pests Acts. This includes private and business properties, ash-tips, sewerage works and streams. The annual test of manholes was carried out, the inspections showing the manholes were free of infestation. During the year, 789 inspections were carried out, and 2288 baits laid. This work met with considerable success.

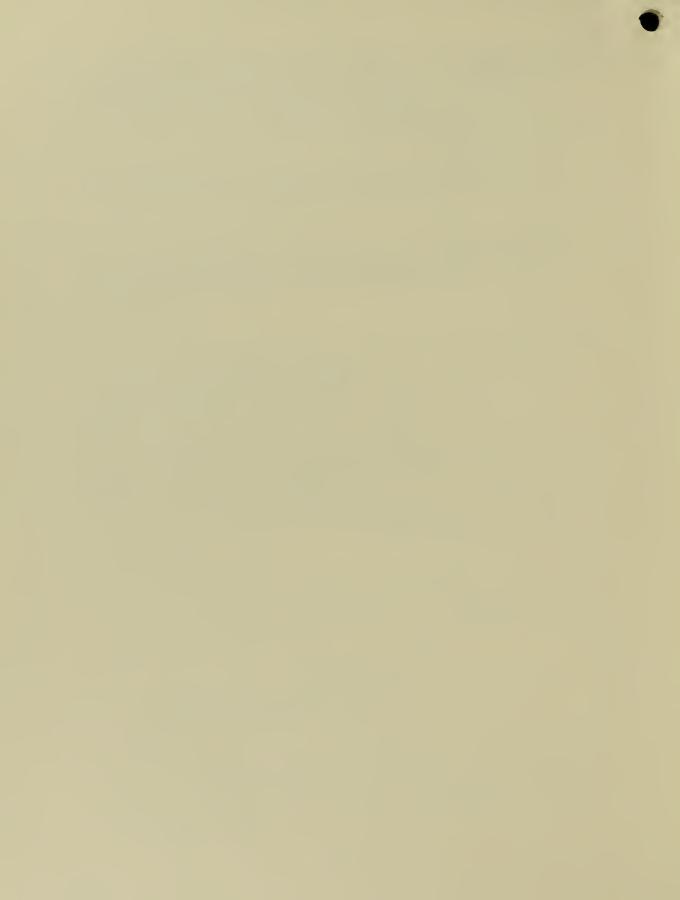
Factories and Workshops.

Periodical inspections were made and conditions were found to be satisfactory.

I am,

Yours faithfully,

T. ATTWELL, Cert. S.I.B.
Sanitary Surveyor.









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